Effective October 1, 2000													
		(Colu	mn 2)		SMALL TYPE	ENT		OR	OTHER SMALL				
TOTAL CLAIMS			14					RATE	T	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			- √3 minus 20=		•			X\$ 9=			OR	X\$18=	5-0
INDEPENDENT CLAIMS			minus 3 =		· ×			X40=	1		OR	X80=	
MUI	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+135=			OR	+270=	
· If	the difference i	in column 1 is	less than ze	ero, ente	"0" in column 2			TOTAL			OR		
CLAIMS AS AMENDED - PART II 5/10/04									L		10	OTHER	THAN
		(Column 1)	(Column 2) (Column 3)				L	SMAL	LE	NTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER	PRESENT EXTRA		RATE		ADDI- FEE		RATE	ADDI- TIONAL FEE
	Total	.12	Minus	-2	8	=		X\$ 9=			OR	X\$18=	
	Independent	• 1	Minus	يُ ٠٠٠٠	3	=		X40=			OR	X80=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE				J	+135=		-	OR	+270=	
RCE/3/1/es									AL			TOTAL	·
												ADDIT. FEE	
		(Column 1) CLAIMS			mn 2) HEST	(Colúmn 3	4		_	ADDI	1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	MBER OUSLY FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	TIONAL FEE
	Total	· /2	Minus	. /0	2_	= -	1	X\$ 9=	-]		OR	X\$18=	
	Independent	• /	Minus		3 TCLAIM	1	-	X40=			OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								=		OR	+270=	
					•••••			TOT.	AL EE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)_						·
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		=		X\$ 9=	.		OR	X\$18=	
	Independent	•	Minus] ···		=	1	X40=	1	-	OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=			OR	+270=	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ADDIT. FEE													
	The "Highest Nun	nber Previously Pa	aid For (Total	or Indepen	dent) is th	e highest num	ber fo	ound in the	арр	ropriate bo	x in co	olumn 1.	

Application or Docket Number